

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> St. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD

2007 OCT 30 AM 11:32

COMMITTEE NAME (Must be same as on Statement of Organization)

WRIGHT for Iowa City

IMPORTANT: Indicate by # type of committee you are reporting for: 6  
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Michael Wright

Political Party (if applicable)

NA

Office Sought

City Council, Iowa City

District (if Senate or House)

NA

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Holly Jane Hart  
SIGNATURE OF PERSON FILING REPORT

319-337-7341  
TELEPHONE

10/30/07  
DATE SIGNED

I AM FILING A November 1, 2007 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election  
November 6, 2007  
County & Local Committees, enter County in  
which Election is held  
Johnson

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 2,194.74

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

\$ 2515.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 4709.74

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

\$ 22034.53

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 2,675.21

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 49.65

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ \_\_\_\_\_

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

WRIGHT for Iowa City

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/1/07	ID# CK# cash	MISC. CASH	NA	\$ 5	<input type="checkbox"/>
10/1/07	ID# CK# 4658	Paula Brandt 67 White Oak Place Iowa City, IA 52245	None	25	<input type="checkbox"/>
10/9/07	ID# CK# 5138	Noel Johnson 615 S. 1st Ave. Iowa City, IA 52245	None	15	<input type="checkbox"/>
10/6/07	ID# CK# 3737	Jeff + Lois Cox 112 S. Dodge St. Iowa City, IA 52240	None	100	<input type="checkbox"/>
10/6/07	ID# CK# 13588	Janet Lyness 3010 Creighton Drive Iowa City, IA 52245	None	75	<input type="checkbox"/>
10/10/07	ID# CK# 1710	Mark + Bonnie Perno 28 Galway Place Iowa City, IA 52246	None	100	<input type="checkbox"/>
10/10/07	ID# CK# 3114	Steven Rose 306 W. 1st Ave Indianola, IA 52125	None	100	<input type="checkbox"/>
10/10/07	ID# CK# 1740	Amy + Gino Campbell-Fleming 125 48th St Des Moines, IA 50310	?	30	<input type="checkbox"/>
10/11/07	ID# CK# 2808	Laurel Riley 806 Walnut St. Iowa City, IA 52240	None	90	<input type="checkbox"/>
10/11/07	ID# CK# 8141	Charlie Basham + Karen Fox 37 Colwyn Court Iowa City, IA 52245	None	100	<input type="checkbox"/>
SUB-TOTAL				\$ 640	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)WRIGHT for Iowa City

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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10/11/07	ID# CK# 871	Larry Baker 1217 Rochester Ave Iowa City, IA 52245	none	\$ 50	<input type="checkbox"/>
10/12/07	ID# CK# 6405	Bruce Drew 4425 Abbott Ave S. Minneapolis, MINN 55410	Uncle	100	<input type="checkbox"/>
10/12/07	ID# CK# 2763	Margaret Drew 4425 Abbott Ave S. Minneapolis, MINN 55410	aunt	100	<input type="checkbox"/>
10/14/07	ID# CK# 4616	Peter S. Fisher 5109 110th St. NE Solon, IA 52333	none	50	<input type="checkbox"/>
10/14/07	ID# CK# 3633	David McCartney 1302 Muscatine Ave Iowa City, IA 52240	none	100	<input type="checkbox"/>
10/14/07	ID# CK# 3632	James Petersen 1302 Muscatine Ave Iowa City, IA 52240	none	100	<input type="checkbox"/>
10/15/07	ID# CK# 7759	Dee + Carrie Norton 1008 Marcy St Iowa City, IA 52240	none	50	<input type="checkbox"/>
10/15/07	ID# CK# 3686	Joseph L. Bolcom 728 Acad Ave Iowa City, IA 52245	none	50	<input type="checkbox"/>
10/15/07	ID# CK# 4080	Duncan + Rachel Stewart 1321 Oakcrest Ave Iowa City, IA 52246	none	50	<input type="checkbox"/>
10/15/07	ID# 6294 CK# 1189	Iowa City Carpenters PAC 705 S. Clinton St Iowa City, IA 52240	none	100	<input type="checkbox"/>
SUB-TOTAL				\$ 750	
TOTAL (if last page of this schedule)				\$	

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Page 2 of 4  
(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)WRIGHT FOR IOWA CITY**SCHEDULE****A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**☐ CHECK THIS BOX IF  
AMENDING FORM

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10/16/07	ID# CK# 0000975472	Donald Baxter 316 Ridgeview Ave. Iowa City, IA 52246	none	\$ 100	<input type="checkbox"/>
10/17/07	ID# CK# 3872	Ellen Widjiss 316 Kimball Road Iowa City, IA 52245	none	50	<input type="checkbox"/>
10/17/07	ID# CK# 3291	Judith Pascoe 317 Fairchild St. Iowa City, IA 52245	none	100	<input type="checkbox"/>
10/18/07	ID# 6418 CK# 1117	Iowa City Federation of Labor PAC Account 102 2nd Ave Coralville, IA 52241	none	100	<input type="checkbox"/>
10/18/07	ID# CK# 7185	Kathy Stahmer 706 11th Ave Coralville, IA 52241	none	25	<input type="checkbox"/>
10/20/07	ID# CK# cash	Lisa Martinecz + Dan Crawford 1312 13th St. Coralville, IA 52241	none	100	<input type="checkbox"/>
10/20/07	ID# CK# 2972	Derek Maurer 1405 Oaklawn Ave Iowa City, IA 52245	none	50	<input type="checkbox"/>
10/20/07	ID# CK# 2978	Linda Nelson 1405 Oaklawn Ave Iowa City, IA 52245	none	50	<input type="checkbox"/>
10/22/07	ID# CK# 1051	Diane Spielbauer 833 N. Johnson St Iowa City, IA 52245	none	100	<input type="checkbox"/>
10/24/07	ID# CK# 1422	Katherine Glover 828 Cypress Court Iowa City, IA 52245	none	100	<input type="checkbox"/>
SUB-TOTAL				\$ 775	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)WRIGHT for Iowa Gov**SCHEDULE****A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**☐ CHECK THIS BOX IF  
AMENDING FORM

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10/24/07	ID# CK# 3058	Jeanette Carter 424 Oakland Ave Iowa City, IA 52240	none	\$ 50	<input type="checkbox"/>
10/26/07	ID# CK# 1185	Mark + Diana Russo 614 Clark St Iowa City, IA 52240	none	25	<input type="checkbox"/>
10/27/07	ID# CK# 2099	James O'Gorman 832 Roosevelt St Iowa City, IA 52240	none	50	<input type="checkbox"/>
10/27/07	ID# CK# 8267	Peter + Kathryn Hansen 1203 Cambria Court Iowa City, IA 52246	none	100	<input type="checkbox"/>
10/27/07	ID# CK# cash	Natasa Dvoricova 414 S. Summit St Iowa City, IA 52240	none	10	<input type="checkbox"/>
10/27/07	ID# CK# cash	Andy + Meredith Chappell 911 Rider St. Iowa City, IA 52246	none	40	<input type="checkbox"/>
10/27/07	ID# CK# 2150	Thomas Carner 1627 College Court Place Iowa City, IA 52245	none	50	<input type="checkbox"/>
10/16/07	ID# CK# paypal	Christopher Gross 493 Amsterdam Ave, #3C New York, NY 10024	son	25	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$350

TOTAL (if last page of this schedule)

\$2515.00

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Page 4 of 4  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

WRIGHT for IOWA CITY

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/2/07	ID# 13705 CK# 513	Johnson County Democrats 816 Park Road Iowa City, IA 52246	Fee for table at bar-b-que	\$ 100
10/5/07	ID# 13705 CK# 514	Hopewell & Brother Printers 709 S. Clinton St Iowa City, IA 52240	Campaign brochures	414.50
10/25/07	ID# 13705 CK# 515	KCJJ PO Box 2118 Iowa City, IA 52244	radio spots	714.00
10/25/07	ID# 13705 CK# 516	KXIC 3365 NE Dubuque St Iowa City, IA 52240	radio spots	705.00
10/25/07	ID# 13705 CK# 517	OnMedia Cable Advertising 6300 Council St Cedar Rapids, IA 52402	scroll ad on cable tv channel	100
10/16/07	ID# CK# paypal	paypal.com	transaction fee	1.03
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$2034.53
TOTAL (if last page of this schedule)				\$2034.53

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

WRIGHT for IDWA CITY

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/6/07	Holly Hart PO Box 2448 Idwa City, ID 52244	none	fax- 200 hr copies 124 E Washington St Idwa City, ID 52240	\$ 16.55	<input type="checkbox"/>
10/6/07	Holly Hart see above	none	mailer + postage Idwa City P.O. 400 S. C. Martin St. Idwa City, ID 52240	2.30	<input type="checkbox"/>
10/15/07	Holly Hart see above	none	Precinct map Johnson Co. Auditor 913 S. Duane St Idwa City, ID 52240	2.00	<input type="checkbox"/>
10/18/07	Holly Hart see above	none	precinct maps Johnson Co Auditor 913 S. Duane St Idwa City, ID 52240	4.00	<input type="checkbox"/>
10/23/07	Holly Hart see above	none	late filing fee ID F.C.D. 510 E. 12th St Des Moines, IA 50319	20.00	<input type="checkbox"/>
10/23/07	Holly Hart see above	none	postage Fairfield P.O. Fairfield, IA 52556-9995	4.80	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 49.65	
TOTAL (If last page of this schedule)				\$ 49.65	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)